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Fill in this information to identify your c			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	_	Check if this is an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is government-issued pid identification (for examyour driver's license or passport).	ture First Name	First Name  Middle Name
passporty.	Johnson	
Bring your picture identification to your m	Last Name eeting	Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last years	First Name	First Name
Include your married o	Middle Name	Middle Name
maiden names.	Last Name	Last Name
3. Only the last 4 digits your Social Security	of xxx - xx - <u>0 5 1</u>	8 xxx - xx
number or federal Individual Taxpayer	OR	OR
Identification number	9xx - xx	9xx - xx

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Deb	otor 1 Davon First Name	Middle Negre	Johnson Last Name	Case number (if know	wn)
	First Name	Middle Name			
		About Debtor	1:	About Debtor 2	! (Spouse Only in a Joint Case):
4.	Any business names and Employer	✓ I have no	t used any business names or EINs	s.	used any business names or EINs.
	Identification Numbers (EIN) you have used in the last 8 years	Business name		Business name	
	Include trade names and	Business name	_	Business name	_
	doing business as names	Business name		Business name	
		EIN		EIN	- — — — —
		EIN -		EIN	_ — — — — —
5.	Where you live			If Debtor 2 lives	s at a different address:
		204 N. Larar			
		Number Stree	et .	Number Street	
		Chicago	IL 60644		
		City	State ZIP Code	City	State ZIP Code
		Cook County		County	
		•		-	
		the one above	g address is different from e, fill it in here. Note that the any notices to you at this ss.	from yours, fill	ailing address is different it in here. Note that the court tices to you at this mailing
		204 N. J. away	mia Ava		
		204 N. Larar Number Stree		Number Street	
		P.O. Box		P.O. Box	
		Chicago	IL 60644		
		City	State ZIP Code	City	State ZIP Code
6.	Why you are choosing this district to file for	Check one:		Check one:	
	bankruptcy	petition, I	last 180 days before filing this have lived in this district longer by other district.	petition, I h	est 180 days before filing this eave lived in this district longer other district.
			other reason. Explain. J.S.C. § 1408.)		ther reason. Explain. S.C. § 1408.)
Р	art 2: Tell the Cour	rt About Your Ban	kruptcy Case		
7.	The chapter of the Bankruptcy Code you		r a brief description of each, see No Form 2010)). Also, go to the top of		U.S.C. § 342(b) for Individuals Filing he appropriate box.
	are choosing to file under	Chapter 7			
		Chapter 11			
		Chapter 12	!		
		— Chapter 13	<b>.</b>		

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Deb	otor 1 Davon	M	Johnson	Case number (if know	wn)
	First Name	Middle Name	Last Name	_	,
8.	How you will pay the fee	cou pay	Il pay the entire fee when I file my rt for more details about how you ma with cash, cashier's check, or mone alf, your attorney may pay with a cre	ay pay. Typically, if you are ey order. If your attorney is	e paying the fee yourself, you may submitting your payment on your
			ed to pay the fee in installments. viduals to Pay Your Filing Fee in Ins	•	•
		By I thar fee	quest that my fee be waived (You aw, a judge may, but is not required a 150% of the official poverty line that in installments). If you choose this one fee Waived (Official Form 103B)	to, waive your fee, and ma at applies to your family siz option, you must fill out the	ay do so only if your income is less te and you are unable to pay the Application to Have the Chapter 7
9.	Have you filed for	<b>√</b> No			
	bankruptcy within the last 8 years?	☐ Yes			
		District		When	Case number
		District -		MM / DD / Y	Case number
		District _		When	Case number
		District			Case number
10.	Are any bankruptcy	<b>☑</b> No		Wilvi / DD / T	
	cases pending or being filed by a spouse who is	— ☐ Yes			
	not filing this case with	— Debtor		Relati	onship to you
	you, or by a business partner, or by an	District			Case number,
	affiliate?				YYY if known
		Debtor		Relati	onship to you
		District _			Case number,
11.	Do you rent your residence?	✓ No. ☐ Yes	residence?	riction judgment against yo	u and do you want to stay in your
			<ul><li>No. Go to line 12.</li><li>Yes. Fill out Initial Statemer and file it with this bankrupto</li></ul>	•	nent Against You (Form 101A)

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Deb	otor 1	Davon First Name	M Middle N	lamo	Johnson Last Name		Case number (i	f known)		_
Pa	art 3:	•			sses You Own as a	a Sole Prop	orietor			
12.	-	u a sole proprietor full- or part-time ss?	<b>☑</b>		Go to Part 4. Name and location of b	usiness				
	busines individu separat a corpo	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it			Name of business, if any  Number Street					_
	If you h sole pro				City  Check the appropriate	box to descri	be your business:	State	ZIP Code	_
	to this p	petition.			Single Asset Rea Stockbroker (as of	I Estate (as de defined in 11 U er (as defined	led in 11 U.S.C. § efined in 11 U.S.C § J.S.C. § 101(53A)) in 11 U.S.C. § 101	. § 101(51B))		
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business		can mos	set ap	ppropriate deadlines. If	you indicate the nent of operati	nat you are a smal ons, cash-flow sta	l business deb tement, and fe	business debtor so that it otor, you must attach your ederal income tax return 116(1)(B).	
	debtor	debtor?	$\overline{\mathbf{A}}$	No.	I am not filing under C	hapter 11.				
		For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I ar	m NOT a small bus	siness debtor a	according to the definition in	١
		C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I ar	m a small business	s debtor accor	rding to the definition in the	
Pa	art 4:	Report If You C	Own o	r Hav	e Any Hazardous F	Property or	Any Property	That Need	ls Immediate Attentio	n
14.	propert alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable to public health or		No Yes.	What is the hazard?					
	safety? any pro	Or do you own operty that needs iate attention?			If immediate attention	is needed, wh	y is it needed?			
	perisha livestoc	ample, do you own ble goods, or ok that must be fed, or ng that needs urgent ?			Where is the property?		Street			_
	. opano									_
						City		۹	State ZIP Code	

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Debtor 1 Davon Johnson Case number (if known) First Name Middle Name Last Name

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

15. Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

**About Debtor 1:** 

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

reasonably tried to do so.

 □ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency. along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me □ Disability. to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1	Davon First Name	M Middle N	lame	<b>Johnson</b> Last Name		Case number (if	know	n)
P	art 6:	Answer These	Quest	ions	for Reporting P	Purpos	ses		
16.	What k have?	ind of debts do you	16a			vidual pr	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b		•	or invest	iness debts? Business debt ment or through the operation		e debts that you incurred to obtain e business or investment.
			16c	. Sta	te the type of debts	you owe	e that are not consumer or bus	sines	s debts.
17.	Are you	u filing under er 7?		No.	I am not filing und	er Chap	ter 7. Go to line 18.		
	any exc exclude admini are pai availab	strative expenses d that funds will be lle for distribution		Yes.	-	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.	How m	ecured creditors? any creditors do timate that you		1-49 50-99 100-1 200-9	99		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Davon	М	Johnson	Case number (if known)
	First Name	Middle Name	Last Name	
Part 7:	Sign Below			
For you		I have examinand correct.	ned this petition, and I dec	are under penalty of perjury that the information provided is true
			11, United States Code. 1 i	I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, understand the relief available under each chapter, and I choose to
		•	•	ot pay or agree to pay someone who is not an attorney to help me and read the notice required by 11 U.S.C. § 342(b).
		I request relie	ef in accordance with the cl	napter of title 11, United States Code, specified in this petition.
		connection wi	•	concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.
			n M Johnson Johnson, Debtor 1	X Signature of Debtor 2
		Executed	on <b>04/12/2016</b>	Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1	Davon	M	Johnson	Case number (if known)
	First Name	Middle Name	Last Name	
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.		eligibility to prelief availab the debtor(s)	proceed under Chapter 7, 1 ble under each chapter for the notice required by 11	in this petition, declare that I have informed the debtor(s) about 11, 12, or 13 of title 11, United States Code, and have explained to which the person is eligible. I also certify that I have delivered to U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, an inquiry that the information in the schedules filed with the petition
			ert J. Adams & Associa of Attorney for Debtor	Date 04/12/2016 MM / DD / YYYY
			J. Adams & Associates	s
		Printed no Robert	<sup>ame</sup> J. Adams & Associates	s
		Firm Nam		
		Number	Jackson, Suite 202 Street	
		Chicago	)	IL 60607
		City		State ZIP Code
		Contact p	phone (312) 346-0100	Email address
		0013056	5	
		Bar numb	oer	State

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Fill in this in	nformation to i	dentify your case	and this filing:		
Debtor 1	Davon	M	Johnson		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United States E	3ankruptcy Court fo	r the: NORTHERN C	DISTRICT OF ILLINOIS		
Case number	, ,				
(if known)				_	if this is an led filing
Official Forr	m 106A/B				
	4/B: Property	y			12/15
filing together, k sheet to this for	both are equally remember on the top of a	esponsible for supplyi any additional pages,	Be as complete and accurate as ping correct information. If more write your name and case numb	space is needed, attach a er (if known). Answer eve	separate ry question.
✓ No. Go	n or have any legal o to Part 2. Where is the propert	·	t in any residence, building, land	l, or similar property?	
	•	•	of your entries from Part 1, incluite that number here		\$0.00
Part 2: D	escribe Your V	ehicles			
-		•	n any vehicles, whether they are also report it on Schedule G: Exec	_	•
3. Cars, vans,	, trucks, tractors, s	sport utility vehicles,	motorcycles		
□ No ☑ Yes					
3.1.	Fand	Who has Check one	an interest in the property?	Do not deduct secured clai amount of any secured clai	•
Make: Model:	<u>Ford</u> E150	Debto		Creditors Who Have Claim	
Year:	1996	Debto	or 2 only	Current value of the	Current value of the
Approximate mile	-	_	or 1 and Debtor 2 only ast one of the debtors and another	entire property? \$2,500.00	portion you own?
Other information			ist one of the deptore and another	φ2,300.00	\$2,500.00
1996 Ford E15 miles) body da	i0 (approx. 177,0 amage	<b>—</b>	k if this is community property instructions)		
			recreational vehicles, other veh ft, fishing vessels, snowmobiles, m		
✓ No ☐ Yes					
	-	•	of your entries from Part 2, inclu	uding any	\$2,500.00

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Deb	otor 1	Davon First Name	M Middle Name	Johnson Last Name	Case number (if known)	
Р	art 3:	1		and Household Items		
Do	you own	or have any le	egal or equitable in	terest in any of the following	items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Househ Example					
	□ No ✓ Yes	. Describe	Two rooms of fu	ırniture of various ages		\$100.00
7.	Electroi Example	es: Televisions			oment; computers, printers, scanners; ameras, media players, games	
	□ No ☑ Yes	. Describe	2 Tv's, cell phon	e, dvd and other assorted	l electronic products	\$200.00
8.		•		gs, prints, or other artwork; boo ollections; other collections, m	oks, pictures, or other art objects; emorabilia, collectibles	
	✓ No ☐ Yes	. Describe				
9.			otographic, exercise	, and other hobby equipment; I tools; musical instruments	picycles, pool tables, golf clubs, skis;	
	✓ No ☐ Yes	. Describe				
10.	Firearm Example		es, shotguns, ammu	nition, and related equipment		
	✓ No ☐ Yes	. Describe				
11.	Clothes Example	es: Everyday c	clothes, furs, leather	coats, designer wear, shoes, a	accessories	
	☐ No ☑ Yes	. Describe	Clothing			\$120.00
12.	<b>Jewelry</b> Example		•	elry, engagement rings, weddi	ng rings, heirloom jewelry, watches, gems,	
	✓ No ☐ Yes	. Describe				
13.		m animals es: Dogs, cats,	, birds, horses			
	✓ No ☐ Yes	. Describe				
14.	Any oth did not	-	nd household item	s you did not already list, inc	cluding any health aids you	
		. Give specific				
15.			-	s from Part 3, including any e	entries for pages you have	\$420.00

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Deb	otor 1	Davon First Name	Middle Name	Johnson Last Name	Case number (if known)						
Р	art 4:	Describe Yo	our Financial Ass	sets							
Do	Do you own or have any legal or equitable interest in any of the following?  Do you own or have any legal or equitable interest in any of the following?										
16.	Cash Examp	les: Money you ha	ave in your wallet, in y	our home, in a safe depos	it box, and on hand when you file your						
	✓ No ☐ Ye	s			Cash:						
17.	-	-	uses, and other simila		deposit; shares in credit unions, multiple accounts with the same						
	✓ No ☐ Yes	S	Institutio	on name:							
18.			r publicly traded sto	<b>cks</b> with brokerage firms, mone	ey market accounts						
	✓ No ☐ Yes	S	Institution or issue	er name:							
19.	an inte	rest in an LLC, pa	ck and interests in i artnership, and joint	•	porated businesses, including						
	info	s. Give specific ormation about	Name of entity:		% of ownership:						
20.	Negotia	able instruments in	clude personal checl	· ·	otiable instruments issory notes, and money orders. signing or delivering them.						
	info	s. Give specific ormation about m	Issuer name:								
21.		nent or pension a les: Interests in IR profit-sharing	A, ERISA, Keogh, 40	01(k), 403(b), thrift savings	accounts, or other pension or						
		s. List each count separately.	Type of account:	Institution name:							
22.	Your sh Examp		deposits you have m		nue service or use from a company ric, gas, water), telecommunications						
	✓ No ☐ Ye:	S		Institution name or individ	ual:						
23.	Annuit No	ies (A contract fo		payment of money to you, e	either for life or for a number of years)						
24.	Interes	ts in an education		t in a qualified ABLE prog	gram, or under a qualified state tuition p	orogram.					
	<b>☑</b> No	,,,,	.,,	•	/ file the records of any interests. 11 U.S.	C. § 521(c)					

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Deb	tor 1	Davon	M Middle Neme	Johnson	Case number (if	known)	
25	Tuucto	First Name	Middle Name	Last Name	on linted in line 4) and viabt		
20.	power	s exercisable for		erty (other than anythii	ng listed in line 1), and right	s or	
		s. Give specific ormation about the	em				
26.				ets, and other intellect proceeds from royalties	ual property; and licensing agreements		
		s. Give specific ormation about the	em				
27.	Examp	les: Building perr	nd other general inta nits, exclusive license	-	on holdings, liquor licenses, p	rofessional licen	ses
		s. Give specific ormation about the	em				
Mor	ney or p	roperty owed to	you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to yo	ou				
	☑ No		oformation			Endoral	: <b>\$0.00</b>
		<ul><li>Give specific in out them, including</li></ul>				Federal	
	-	u already filed the d the tax years				State:	\$0.00
	an-	a the tax years				Local:	\$0.00
29.	Examp		ump sum alimony, sp	ousal support, child supp	port, maintenance, divorce set	tlement, property	y settlement
	✓ No	s. Give specific i	nformation		Ali	mony:	\$0.00
					Ma	intenance:	\$0.00
					Su	pport:	\$0.00
					Div	orce settlement:	\$0.00
					Pro	operty settlement	t: \$0.00
30.			s, disability insurance	e payments, disability be nefits; unpaid loans you	nefits, sick pay, vacation pay, made to someone else	workers'	
	✓ No	s. Give specific i	nformation				
31.		sts in insurance poles: Health, disab		health savings account	(HSA); credit, homeowner's, o	or renter's insura	nce
	CO	s. Name the insu mpany of each po d list its value	licy	me:	Beneficiary:	Su	ırrender or refund value:
32.	Any in	terest in property are the beneficiary	y that is due you fror	m someone who has di	•		
	✓ No	s. Give specific i	nformation				

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Deb		<b>Davon</b> First Name	M Middle Name	Johnson Last Name	Case number (if known)	
33.	Example			ot you have filed a lawsuit of insurance claims, or rights to	or made a demand for payment o sue	
	✓ No ☐ Yes.	Describe each cla	ıim			
34.	rights to	ontingent and unlice set off claims	quidated claims	of every nature, including o	counterclaims of the debtor and	
	✓ No ☐ Yes.	Describe each cla	ıim			
35.	Any fina	ıncial assets you o	lid not already lis	st		
	✓ No ☐ Yes.	Give specific info	rmation			
36.	Add the attached	dollar value of all d for Part 4. Write	of your entries for that number here	rom Part 4, including any e	ntries for pages you have	\$0.00
Pa	art 5: [	Describe Any B	usiness-Rela	ted Property You Own	or Have an Interest In. List any	real estate in Part 1.
37.	Do you	own or have any le	egal or equitable	interest in any business-re	elated property?	
		Go to Part 6. Go to line 38.				
						Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accoun	ts receivable or co	mmissions you	already earned		olaime of oxomptione.
	✓ No ☐ Yes.	Describe				
39.					ers, fax machines, rugs, telephones,	
	✓ No ☐ Yes.	Describe				
40.	Machine	ery, fixtures, equip	ment, supplies y	ou use in business, and to	ols of your trade	
	✓ No ☐ Yes.	Describe				
41.	Inventor	у				
	✓ No ☐ Yes.	Describe				
42.	Interest	s in partnerships o	or joint ventures			
	✓ No ☐ Yes.	Describe Nam	ne of entity:		% of ownership:	
43.	Custom	er lists, mailing lis	ts, or other com	pilations		
	✓ No ☐ Yes.	Do your lists inc  No Yes. Describ		dentifiable information (as	defined in 11 U.S.C. § 101(41A))?	

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Deb	tor 1	Davon First Name	<b>M</b> Middle Name	Johnson Last Name	Case number (if known)	
44.	Any b	usiness-related	property you did not	already list		
	✓ No	o es. Give specific	c information.			
45.					entries for pages you have	\$0.00
Pa	art 6:			nmercial Fishing-Rela farmland, list it in Part	ted Property You Own or Have a	n Interest In.
46.	Do yo	u own or have ເ	any legal or equitable	interest in any farm- or co	mmercial fishing-related property?	
		o. Go to Part 7. es. Go to line 47	<b>'</b> .			
						Current value of the portion you own? Do not deduct secured claims or exemptions.
47.		animals bles: Livestock.	poultry, farm-raised fish	1		
	✓ No	)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
48.	Crops	either growing	g or harvested			
	_	o es. Give specific ormation				
49.	Farm a	and fishing equ	ipment, implements, r	machinery, fixtures, and to	pols of trade	
	✓ No					
50.	Farm a	and fishing sup	pplies, chemicals, and	feed		
	✓ No					
51.	Any fa	rm- and comm	ercial fishing-related p	property you did not alread	dy list	
	_	os. Give specific				
52.				om Part 6, including any e	entries for pages you have	\$0.00
Pa	art 7:	Describe Al	l Property You Ov	vn or Have an Interes	t in That You Did Not List Above	
53.	-	-	operty of any kind you kets, country club mem	-		
	✓ No	o es. Give specific	c information.			
54	۸	o dollar value (	of all of your entries fr	om Part 7 Write that num	sher here	\$0.00

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Debtor 1	Davon First Name	M Middle Name	Johnson Last Name	Case nu	umber (if known) _		
Part 8:	•	als of Each Part of					
55. Part 1	l: Total real estat	e, line 2				<b>→</b> _	\$0.00
56. Part 2	2: Total vehicles,	line 5		\$2,500.00			
57. Part 3	3: Total personal	and household items,	line 15	\$420.00			
58. Part 4	l: Total financial	assets, line 36		\$0.00			
59. Part 5	5: Total business	-related property, line	45	\$0.00			
60. Part 6	6: Total farm- and	l fishing-related prope	rty, line 52	\$0.00			
61. Part 7	7: Total other pro	perty not listed, line 54	ı	+\$0.00			
62. Total	personal propert	ty. Add lines 56 through	gh 61	\$2,920.00	Copy personal property total	<b>→</b> +_	\$2,920.00
63. Total	of all property or	n Schedule A/B. Add	I line 55 + line 62				\$2,920.00

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Fill in this info	ormation to i	dentify your case	:	
Debtor 1	Davon First Name	M Middle Name	Johnson Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar Case number	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	 Check if this is amended filing
(if known)				
Official Form	106C			
Schedule C:	The Prope	erty You Claim	as Exempt	

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	iim as Exempt		
<ol> <li>Which set of exemptions are you claiming?</li> <li>You are claiming state and federal nonbandare you are claiming federal exemptions. 11 to 2.</li> <li>For any property you list on Schedule A/B the</li> </ol>	kruptcy exemptions.  J.S.C. § 522(b)(2)		ŕ
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: 1996 Ford E150 (approx. 177000 miles) 1996 Ford E150 (approx. 177,000 miles) body damage Line from Schedule A/B:3.1	\$2,500.00	\$2,400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Brief description:  Two rooms of furniture of various ages  Line from Schedule A/B:6	\$100.00	\$100.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
<ul> <li>No</li> <li>Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?</li> <li>No</li> <li>Yes</li> </ul>

3. Are you claiming a homestead exemption of more than \$160,375?

04/16

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Debtor 1	Davon	M	Johnson		Case number	(if known)
	First Name	Middle Name	Last Name			
Part 2:	Additional Pa	age				
	ption of the prope /B that lists this pr	•	Current value of the portion you own		nt of the otion you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		only one box for exemption	
Brief descrip Clothing	tion:		\$120.00	<ul><li>✓ _</li><li>10</li></ul>	\$120.00 00% of fair market	735 ILCS 5/12-1001(a), (e)
Line from So	chedule A/B: 11			ар	alue, up to any pplicable statutory mit	

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F	ill in this inf	ormation to id	dentify your case:				
De	ebtor 1	Davon	М	Johnson			
		First Name	Middle Name	Last Name			
	ebtor 2						
l (S	pouse, if filing)	First Name	Middle Name	Last Name			
Uı	nited States Bar	nkruptcy Court for	the: <b>NORTHERN D</b>	STRICT OF ILLING	DIS		
C	ase number						
(if	known)					Check if this is amended filing	
<b>○</b> t	ficial Forms	40CD				·	<b>-</b>
_	ficial Form						
Sc	hedule D:	Creditors	Who Have Clai	ms Secured I	y Property		12/15
cor	rect informatio	n. If more space		Additional Page, fill	it out, number the enti	Ily responsible for supries, and attach it to thi	
1.	Do any credit	ors have claims	secured by your prop	erty?			
	Ľ	ck this box and so in all of the inforn		ourt with your other so	hedules. You have not	thing else to report on th	is form.
Р	art 1: Lis	t All Secured	Claims				
_							
2.			editor has more than o y for each claim. If mo		Column A	Column B	Column C
	•		ist the other creditors in		Amount of claim	Value of collateral	Unsecured
	•		s in alphabetical order	according to the	Do not deduct the	that supports this	portion
	creditor's nam	e.			value of collateral	claim	If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

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Fill in this inf	ormation to i	dentify your c	250			
Debtor 1	Davon First Name	Middle Name	Johnson Last Name	-		
Dahta a O						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-		
(epouse,g)						
United States Bar	nkruptcy Court fo	r the: NORTHER	RN DISTRICT OF ILLINOIS	-		
Case number				_	<b>1</b> Object Williams	
(if known)					Check if this is amended filing	an
Official Form	106F/F				· ·	
		s Who Hav	e Unsecured Claims			12/15
	Ground	o mio mar				, .0
If more space is n to this page. On t	eeded, copy the he top of any ad	Part you need, f	I claims that are listed in Schedu ill it out, number the entries in the vrite your name and case number secured Claims	e boxes on the left. A		
•		y unsecured claii	ms against you?			
☐ No. Go t ✓ Yes.	to Part 2.					
claim. For ear show both price more space is	ch claim listed, id ority and nonprior	lentify what type o ity amounts. As n ity unsecured clai	creditor has more than one priority f claim it is. If a claim has both prionuch as possible, list the claims in ms, fill out the Continuation Page o	ority and nonpriority am alphabetical order acco	ounts, list that clai ording to the credite	m here and or's name. If
(For an explar	nation of each typ	e of claim, see the	e instructions for this form in the ins	struction booklet.		
				Total claim	Priority amount	Nonpriority amount
2.1				\$2,600.00	\$2,600.00	\$0.00
Robert J Adams	& Associates					
Priority Creditor's Nam 901 W Jackson.			- Last 4 digits of account numbe			
Number Street	Suite 202		When was the debt incurred?	04/11/2016		
			- As of the date you file, the clair	n is: Check all that app	oly.	
			Contingent			
Chicago	IL	60607	Unliquidated			
City	State	ZIP Code	- Disputed			
Who incurred the	debt? Check	one.	Type of PRIORITY unsecured c	laim:		
Debtor 1 only			Domestic support obligations			
Debtor 2 only	Oobtor 2 only		Taxes and certain other debt		ent	
Debtor 1 and D  At least one of	the debtors and	another	Claims for death or personal intoxicated	injury while you were		
ш	claim is for a cor		Other. Specify			
Is the claim subje		•	Attorney fees for this car	se		
☑ No			-			
Yes						

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No. You have nothing to report in this part. Submit this form to the court with you other schedules.   Yes   Yes	Debtor 1	Davon First Name	M Middle Name	Johnson Last Name	Case number (if known)	
No. You have nothing to report in this part. Submit this form to the court with you other schedules.   Yes	Part 2:	List All of	Your NONPRIORI	ΓΥ Unsecured Clai	ms	
No. You have nothing to report in this part. Submit this form to the court with you other schedules.   Yes   A. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.    Total claim						
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.  If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, lill out the Continuation Page of Part 2.    Total claim				•		
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.    Total claim	ш.		thing to report in this par	t. Submit this form to th	e court with you other schedules.	
If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 2.    Total claim						
Section   State   All gilts of account number   Student loans   St.	If a cr type c	reditor has more to of claim it is. Do i	han one nonpriority unse not list claims already inc	ecured claim, list the cre	ditor separately for each claim. For each claim listed than one creditor holds a particular claim, list the of	
Black River Memorial Hospital Nonpriority Creditor's Name 711 W Adams St. Number Street  Black River Falls WI 54615 City State ZiP Code Who incurred the debt? Check one.  Check if this claim is for a community debt Is the claim subject to offset?  As of the date you file, the claim is: Check all that apply.  Check if this claim is for a community debt  As of the date you file, the claim is: Check all that apply.  Check if this claim is for a community debt  As of the date you file, the claim is: Check all that apply.  Check if this claim is for a community debt  As of the date you file, the claim is: Check all that apply.  Type of NONPRIORITY unsecured claim:  Who incurred the debt? Check one.  Check if this claim is for a community debt  As of the date you file, the claim is: Check all that apply.  State ZiP Code  Who incurred the debts  Type of NONPRIORITY unsecured claim:  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NoNPRIORITY unsecured claim:  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NoNPRIORITY unsecured claim:  When vas the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NoNPRIORITY unsecured claim:  Who incurred the debt? Check one.  State ZiP Code  Who incurred the debtors and another  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a comm						Total claim
When was the debt incurred?    Y11 W Adams St.						\$207.00
Number   Street   Street   Street   Street   Street   Contingent   Unliquidated   Disputed			ospital	_		
Contingent   Con					<del></del>	
Black River Falls   WI   54615 City   State   ZIP Code   Disputed   Disputed	Number	Street		<u> </u>	ille, the claim is: Check all that apply.	
Black River Falls				<b>—</b>		
Type of NONPRIORITY unsecured claim:  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  Nonportry Creditor's Name Department Of Revenue Number Street PO Box 88292  Chicago IL 60680  Chicago IL 60680  Chicago Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 4 o						
Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ No □ Yes  4.2  City Of Chicago Nonpriority Creditor's Name Department Of Revenue Number Street PO Box 88292 □ Chicago  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Disp		ver Falls		<b>–</b>		
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□ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes  4.2  City Of Chicago Nonpriority Creditor's Name Department Of Revenue Number Street PO Box 88292  Chicago IL 60680  City State ZIP Code Who incurred the debt? □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Debtor 1 onlogo □ Check if this claim is for a community debt □ Debtor 2 only □ Check if this claim is for a community debt □ Debtor 3 onlogo □ Check if this claim is for a community debt □ Debtor 3 onlogo □ Check if this claim is for a community debt □ Debtor 4 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Debtor 5 onlogo □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a		r 2 only			•	
At least one of the debtors and another   Other. Specify   Medical	_		•	· ·		
st the claim subject to offset?    No	☐ At leas	st one of the debt	ors and another	<b>=</b> ~, ~, .,		
\$2,000.00  City Of Chicago Nonpriority Creditor's Name Department Of Revenue Number Street PO Box 88292  Chicago IL 60680 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  \$2,000.00  \$2,000.00  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify parking tickets-non dischargeable	☐ Check	t if this claim is f	or a community debt	Medical		
Yes		m subject to offs	set?			
\$2,000.00  City Of Chicago Nonpriority Creditor's Name Department Of Revenue Number Street PO Box 88292  Chicago  Lil 60680  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  \$2,000.00  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify parking tickets-non dischargeable	$\stackrel{\boldsymbol{L}}{=}$					
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When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Chicago IL 60680 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify parking tickets-non dischargeable	City Of C	hicago		Last 4 digits of acc	ount number	Ψ2,000.00
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Chicago   L   60680   City   State   ZIP Code   Check one.   ZIP Code   Check one.   Student loans   Obligations arising out of a separation agreement or divorce   that you did not report as priority claims   Debtor 2 only   At least one of the debtors and another   Check if this claim is for a community debt   Contingent   Unliquidated   Disputed   Disputed   Type of NONPRIORITY unsecured claim:   Student loans   Obligations arising out of a separation agreement or divorce   that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   parking tickets-non dischargeable			9			
Chicago  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Chicago  IL 60680  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify parking tickets-non dischargeable					ine, the claim is. Check all that apply.	
Chicago   L   60680  City   State   ZIP Code   Type of NONPRIORITY unsecured claim:  Who incurred the debt?   Check one.   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Darking tickets-non dischargeable				_ <b>_</b>		
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Who incurred the debt? Check one.  ☑ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt  ☐ Check if this claim is for a community debt				Type of NONDRIOR	NTV uncoured alaims	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ Check if this claim is for a community debt		red the debt?		• •	ii i unsecurea ciann.	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ○ Other. Specify □ parking tickets-non dischargeable				<b>—</b>	ng out of a separation agreement or divorce	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ parking tickets-non dischargeable		,	1			
☐ Check if this claim is for a community debt  □ Check if this claim is for a community debt  □ parking tickets-non dischargeable	<b>=</b>			•	· · · · ·	
	느					
le the claim subject to offset?	ш		-	parking ticket	s-non dischargeable	
— N		m subject to offs	set?			
	ر ن					

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Debtor 1	Davon		M	Johnson Case number (if known)	
	First Name		Middle Name	Last Name	
Part 2:	Your NO	NPRIO	RITY Unsacu	red Claims Continuation Page	
After listin previous p		n this p	age, number the	em sequentially from the	Total claim
4.3	9				*****
	-1/61			Look A digita of account number	\$4,814.00
	Ed/Navient Creditor's Name			Last 4 digits of account number	
PO Box 9				When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
				☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
				— ☐ Disputed	
Wilkes B	arre	PA State	<b>18773</b> ZIP Code		
City Who incur	red the debt?	Check		Type of NONPRIORITY unsecured claim:	
	1 only	0		Student loans  Obligations grising out of a congretion agreement or diverse	
	2 only			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
<b>≌</b>	1 and Debtor 2	•		Debts to pension or profit-sharing plans, and other similar debts	
_	st one of the deb			☑ Other. Specify	
☐ Check	if this claim is	for a co	mmunity debt	Student loan	
	m subject to of	fset?			
☑ No					
Yes					
4.4					\$6,076.00
Dent Of F	d/Navient			Last 4 digits of account number	40,010.00
	reditor's Name			When was the debt incurred?	
PO Box 9	0635 Street			As of the date you file, the claim is: Check all that apply.	
Number	Sireet			_ ☐ Contingent	
				Unliquidated	
Wilkes B	orro	DΛ	18773	Disputed	
City	arre	PA State	ZIP Code	Type of NONPRIORITY unsecured claim:	
•	red the debt?	Check	one.	Student loans	
<b>☑</b> Debtor	.*			☐ Obligations arising out of a separation agreement or divorce	
ш	· 2 only	only		that you did not report as priority claims	
	· 1 and Debtor 2 st one of the deb		l another	Debts to pension or profit-sharing plans, and other similar debts	
—	if this claim is			✓ Other. Specify	
_	m subject to of		minumity debt	Student loan	
✓ No	ii subject to on	3011			
Yes					
4.5					\$1,526.00
	d/Navient			Last 4 digits of account number	
PO Box 9	reditor's Name			When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
				_ Contingent	
				Unliquidated	
Wilkes B	arre	PA	18773	Disputed	
City	rod the delete	State	ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt?	Check	one.	Student loans	
لت	· 2 only			Obligations arising out of a separation agreement or divorce	
ш	1 and Debtor 2	only		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At leas	st one of the deb	otors and	l another	Other. Specify	
☐ Check	if this claim is	for a co	mmunity debt	Student loan	
	m subject to of	fset?			
<b>☑</b> No					
□ Yes					

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Debtor 1	Davon	М		Johnson Case	number (if known)	
	First Name	Midd	le Name	Last Name	· , ,	
Part 2:	Your NO	NPRIORIT	Y Unsecur	ed Claims Continuation Page		
After listing	•	on this page,	number the	n sequentially from the		Total claim
4.6						\$1,827.00
Sprint				Last 4 digits of account number		
	Creditor's Name			When was the debt incurred?		
P.O.Box Number	Street			As of the date you file, the claim is:	Check all that apply.	
				Contingent Unliquidated Disputed	,	
Jackson	ville		260-0670	. — ·		
Debto Debto Debto At leas	rred the debt? r 1 only r 2 only r 1 and Debtor 2 st one of the de k if this claim is m subject to of	Check one  2 only btors and ano s for a commi	ther	Type of NONPRIORITY unsecured of  Student loans  Obligations arising out of a separary that you did not report as priority or  Debts to pension or profit-sharing  Other. Specify  Utility	tion agreement or divorce laims	
Yes						

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Debtor 1	Davon First Name	N	1 Iiddle Name	Johnson Last Name	Case number (if known)	
Part 3:	<b>-</b>			out a Debt That You Alread	y Listed	
For ex credite debts	cample, if a collect or in Parts 1 or 2,	tion aç then li Parts	gency is trying t ist the collection 1 or 2, list the a	o collect from you for a debt you n agency here. Similarly, if you ha dditional creditors here. If you do	a debt that you already listed in Parts 1 or 2. owe to someone else, list the original ave more than one creditor for any of the not have additional parties to be notified for	
	nt Outsourcing			On which entry in Part 1 or I	Part 2 did you list the original creditor?	
Name PO Box 9	004			Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
	Street			Collecting for - Sprint	Part 2: Creditors with Nonpriority Unsecured Claim	
				— Last 4 digits of account num	ber	
Renton City		WA State	<b>98057</b> ZIP Code			
	rearu Data Inc			On which entry in Part 1 or I	Part 2 did you list the original creditor?	
Name 115 6 th S	st N			Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
	Street			Collecting for - Black River Memorial Hospital	Part 2: Creditors with Nonpriority Unsecured Claims	
La Cross		WI	54601	— Last 4 digits of account num		
City		State	ZIP Code	<del></del>		

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Debtor 1	Davon	M	Johnson	Case number (if known)
	First Name	Middle Name	Last Name	· · · · · · · ·

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nomi art i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>+</b>	\$2,600.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$2,600.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> +	\$16,450.00
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$16,450.00

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Fill in this inf	ormation to iden			
Debtor 1	Davon First Name	M Middle Name	Johnson Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	: NORTHERN DIST	RICT OF ILLINOIS	
Case number (if known)				Check if this is an
(11 1410 1111)				amended filing

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill	in this inf	ormation to	identify your case	t et		
Debt	or 1	Davon First Name	M Middle Name	<b>Johnson</b> Last Name		
Debt (Spo	or 2 use, if filing)	First Name	Middle Name	Last Name		
` '	. 0,			DISTRICT OF ILLINOIS		
	e number lown)				Check if this is an amended filing	
	ial Form					
Sch	edule H	: Your Cod	lebtors			12
two m neede page.	arried peop d, copy the On the top	le are filing tog Additional Pag	ether, both are equally e, fill it out, and numb lal Pages, write your n	/ responsible for supplyin er the entries in the boxes	Be as complete and accurate as possible. If g correct information. If more space is on the left. Attach the Additional Page to this known). Answer every question.	
	nclude Arizor No. Go	na, California, Id to line 3. I your spouse, fo	aho, Louisiana, Nevada		itory? (Community property states and territories Texas, Washington, and Wisconsin.) e time?	
3. Ir	ш		codebtors. Do not inc	lude your spouse as a coo	debtor if your spouse is filing with you. List the	

person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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i	ill in this inform	ation to identif	y your case:					
	Debtor 1	Davon	М	Johnson				
		First Name	Middle Name	Last Name			Che	ck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				An amended filing
				DISTRICT OF IL	LINO	ıe		A supplement showing postpetition
	United States Bankro Case number	uptcy Court for the:	NORTHERN	DISTRICT OF IL	LINU	13		chapter 13 income as of the following date:
	(if known)							MM / DD / YYYY
0	fficial Form 10	<u>61</u>						
S	chedule I: You	ur Income						12/15
res ind ab yo	sponsible for supply clude information ab out your spouse. If ur name and case n	ring correct inform out your spouse. more space is nee	ation. If you ard If you are separ eded, attach a se Answer every o	e married and not rated and your spo eparate sheet to th	filing ouse i	jointly, and s not filing v	your : vith y	I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your emplo							
	If you have more the	nan one		Debtor 1				Debtor 2 or non-filing spouse
	job, attach a separ	ate page Emplo	yment status	✓ Employed				Employed
	with information ab additional employe	ers.		☐ Not employ	ea			■ Not employed
		Occup	oation	Mixer				-
	Include part-time, s or self-employed w		yer's name	Kerry Ingredie	nts			
	Occupation may in student or homema	- Lilipi	yer's address	1301 Mark St				_
	applies.	akei, ii ii		Number Street  Elk Grove Villa	ane I	1		Number Street
				- LIK GIGVO VIIIK	.go, i	-		
				City		State Zip Co	ode	City State Zip Code
		How I	ong employed t	_	hs	otato Espon		o., oop occo
	Part 2: Give D	etails About M						
					ina ta	roport for on	u lina	write CO in the angest Include your
	n-filing spouse unless			n. II you nave nom	ing to	report for ar	ıy iirie	, write \$0 in the space. Include your
	ou or your non-filing on need more space, a			er, combine the info	ormati	on for all em	ploye	rs for that person on the lines below. If
						For Debtor	1	For Debtor 2 or non-filing spouse
2.	List monthly gros payroll deductions) would be.	s wages, salary, a			2.	\$2,07	6.58	
3.	Estimate and list	monthly overtime	pay.		3. 🖣	\$	0.00	
4.	Calculate gross in	ncome. Add line 2	+ line 3.		4.	\$2,07	6.58	

Official Form 106l Schedule I: Your Income page 1

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Debto	r 1	Davon	M	Johnson		Case nu	umber (if know	/n)	
		First Name	Middle Name	Last Name		For Debtor 1	For Debto		
(	Сор	y line 4 here		<b></b>	4.	\$2,076.58	_		
	-	all payroll ded		_					
			e, and Social Security dec	ductions	5a.	\$309.19			
5	b.	Mandatory co	ontributions for retiremen	t plans	5b.	\$0.00			
5	ic.	Voluntary co	ntributions for retirement	plans	5c.	\$0.00			
5	id.	Required rep	ayments of retirement fur	id loans	5d.	\$0.00			
5	ie.	Insurance			5e.	\$0.00			
5	f.	Domestic sup	oport obligations		5f.	\$0.00			
	•	Union dues			5g.	\$0.00			
5	ih.	Other deduct Specify:	ions.		5h. <b>+</b>	\$0.00			
		the payroll de 5h.	eductions. Add lines 5a	+ 5b + 5c + 5d + 5e + 5f +	6.	\$309.19			
7. (	Calc	culate total mo	onthly take-home pay.	Subtract line 6 from line 4.	7.	\$1,767.39			
8. L	.ist	all other inco	me regularly received:						
8	a.		om rental property and frofession, or farm	om operating a	8a.	\$0.00			
		gross receipts	ment for each property and , ordinary and necessary b hly net income.	•					
8	b.	Interest and o	dividends		8b.	\$0.00			
8	c.		ort payments that you, a n gularly receive	on-filing spouse, or a	8c.	\$0.00			
			ny, spousal support, child s ment, and property settleme						
8	d.	Unemployme	nt compensation		8d.	\$0.00			
8	e.	Social Securi	ity		8e.	\$0.00			
8	f.	Other govern	ment assistance that you	regularly receive					
		cash assistan	assistance and the value (if ce that you receive, such a er the Supplemental Nutritic osidies.	s food stamps					
		Specify:			8f.	\$0.00			
8	g.	Pension or re	tirement income		- 8g.	\$0.00			
8	h.	Other monthl					-		
		Specify: Inc	ome from part-time job	cutting harir	. 8h. <b>+</b>	\$220.00			
9. <i>A</i>	۸dd	all other inco	<b>me.</b> Add lines 8a + 8b + 8	c + 8d + 8e + 8f + 8g + 8h.	9.	\$220.00			
			r income. Add line 7 + line ine 10 for Debtor 1 and Deb		10.	\$1,987.39	+	=	\$1,987.39
l:	nclu		ns from an unmarried partne	expenses that you list in Seer, members of your househ			our roommates	s, and othe	r
[	Oo r	not include any	amounts already included	in lines 2-10 or amounts tha	t are n	ot available to pay	expenses list	ed in Sche	
5	Spe	cify:						_ 11. +	\$0.00
iı	nco			<b>0 to the amount in line 11.</b> f Your Assets and Liabilities				12.	\$1,987.39 Combined monthly income
13. E	)o \	ou expect an	increase or decrease witl	nin the year after you file th	his for	m?			•
_	₫ □	No. Yes. Explain:	None.	· •					

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Ī	ill in this inform	nation to identif	y your case:			Cha	ck if this	io	
	Debtor 1	Davon	М	Johns	son			ended filing	
		First Name	Middle Name	Last Na	me			ement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me		chapter followin	· 13 expenses a g date:	s of the
	United States Bankr	uptcy Court for the:	NORTHERN DI	STRICT OF	FILLINOIS		MM / D	D / YYYY	<u> </u>
	Case number						WIWI / D	<i>D</i> / 1111	
	(if known)	.0.1				]			
	fficial Form 10								
	chedule J: Yo								12/15
COI		more space is nee	eded, attach anoth	er sheet to t	ing together, both ar his form. On the top				
P	Part 1: Descri	be Your House	hold						
1.	Is this a joint case	e?							
	No	ebtor 2 live in a se			s for Separate Housel	nold of	f Debtor	2.	
2.	Do you have depe	endents?	No		Denondentle releti		. 10	Danandantla	Deep demandant
	Do not list Debtor Debtor 2.		Yes. Fill out this in for each dependen		Dependent's relation Debtor 1 or Debtor		———	Dependent's age	Does dependent live with you?
	Do not state the de names.	ependents'							Yes No Yes
									No Yes
									No Yes
									□ No - □ Yes
3.	Do your expenses expenses of peop yourself and your	ole other than	✓ No ☐ Yes						
P	Part 2: Estima	ate Your Ongoir	ng Monthly Exp	enses					
to i		of a date after the		-	re using this form as supplemental Sche				
	lude expenses paid ch assistance and h		•	•				Your expens	ses
4.		ne ownership expe age payments and a					2	1	\$650.00
	If not included in	line 4:							
	4a. Real estate ta	axes					2	ła	
	4b. Property, hon	neowner's, or renter'	s insurance				2	1b	
	4c. Home mainte	nance, repair, and ι	ıpkeep expenses				2	łc	
	4d Homeowner's	association or cond	dominium dues				,	1d	

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Debto	or 1	Davon First Name	M Middle Name	<b>Johnson</b> Last Name	Case number (if k	nown)
		FIRST Name	міадіе Name	Last Name		
						Your expenses
5. /	Add	litional mortgag	e payments for your resid	lence, such as home equity loans	5.	
6. l	Jtili	ties:				
6	Sa.	Electricity, heat	, natural gas		6a.	\$58.00
6	ßb.	Water, sewer, g	arbage collection		6b.	
6	Sc.	Telephone, cell cable services	phone, Internet, satellite, a	nd	6c.	\$50.00
6	ßd.				6d.	
		d and housekee			7.	\$350.00
8. (	Chil	dcare and child	ren's education costs		8.	\$30.00
9. (	Clot	hing, laundry, a	and dry cleaning		9.	\$100.00
10. I	ers	sonal care prod	ucts and services		10.	\$20.00
11. [	Med	lical and dental	expenses		11.	\$50.00
		nsportation. Inc . Do not include	lude gas, maintenance, bus	s or train	12.	\$433.00
		ertainment, club gazines, and boo	os, recreation, newspaper oks	s,	13.	\$45.00
14. (	Cha	ritable contribu	tions and religious donati	ons	14.	
		ırance.				
[	Do r			ay or included in lines 4 or 20.		
•	15a.				15a	a
,	15b.	. Health insurar	nce		15h	).
,	15c.				150	s. <b>\$73.00</b>
	15d.		<del></del>		150	d
16.			•	our pay or included in lines 4 or 20.		·
17. I	nst	allment or lease	payments:			
,	17a.	. Car payments	for Vehicle 1		178	а
	17b.	. Car payments	for Vehicle 2		171	0.
	17c.	Other. Specif	y:		170	c
	17d.	Other. Specif	y:		170	d
18. `	<b>′</b> ou	r payments of a	limony, maintenance, and	I support that you did not report a , Your Income (Official Form 106I)	as 18.	
		er payments you	u make to support others	who do not live with you.	19.	
	วมษ	UIIV.			19,	

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Deb	tor 1	Davon	М	Johnson	Case number (if know	n)
		First Name	Middle Name	Last Name		
20.		er real property e edule I: Your Inc		lines 4 or 5 of this form or o	on	
	20a.	Mortgages on o	other property		20a.	
	20b.	Real estate tax	œs		20b.	
	20c.	Property, home	eowner's, or renter's insurar	nce	20c.	
	20d.	Maintenance, r	repair, and upkeep expense	es	20d.	
	20e.	Homeowner's a	association or condominiun	n dues	20e.	
21.	Othe	er. Specify:			21.	+
22.	Calc	ulate your mont	hly expenses.			
	22a.	Add lines 4 thre	ough 21.		22a.	\$1,859.00
	22b.	Copy line 22 (r	nonthly expenses for Debto	or 2), if any, from Official Forr	m 106J-2. 22b.	
	22c.	Add line 22a a	nd 22b. The result is your	monthly expenses.	22c.	\$1,859.00
23.	Calc	ulate your mont	hly net income.			
	23a.	Copy line 12 (y	our combined monthly inco	ome) from Schedule I.	23a.	\$1,987.39
	23b.	Copy your mor	nthly expenses from line 22	c above.	23b. <b>-</b>	\$1,859.00
	23c.		monthly expenses from you our monthly net income.	r monthly income.	23c.	\$128.39
24.	Do y	ou expect an in	crease or decrease in you	ur expenses within the year	after you file this form?	
	payn			our car loan within the year on odification to the terms of you	or do you expect your mortgage our mortgage?	
		Yes. Explain he None.	re:			

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Fill in this in	nformation to i	dentify your case	:	
Debtor 1	Davon First Name	M Middle Name	Johnson Last Name	
Debtor 2 (Spouse, if filing		Middle Name	Last Name	
	,	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	
Case number (if known)				☐ Check if this amended fili

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$2,920.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$2,920.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$2,600.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>*</b> 40.450.00
	Your total liabilities	\$19,050.00
Ρ	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,987.39
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,859.00

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Debtor 1		Davon First Name	M Middle Name	<b>Johnson</b> Last Name	Case number (if known)			
Pa	art 4	Answer Th	ese Questions fo	r Administrative and	l Statistical Records			
6.	Are	you filing for bank	ruptcy under Chapter	s 7, 11, or 13?				
	<ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>✓ Yes</li> </ul>							
7.	Wha	t kind of debt do y	ou have?					
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.							
		Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
8.				ly Income: Copy your tota Line 11; OR, Form 122C-	I current monthly income from 1 Line 14.	\$1,884.05		
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
					Total claim			
	Fror	n Part 4 on Schedi	ule F/F conv the follo	wina:				

FIU	in Fait 4 on Schedule E/F, copy the following.		
9a.	Domestic support obligations. (Copy line 6a.)	_	\$0.00
9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	_	\$0.00
9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	_	\$0.00
9d.	Student loans. (Copy line 6f.)	_	\$0.00
9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	_	\$0.00
9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+_	\$0.00
9g.	<b>Total.</b> Add lines 9a through 9f.		\$0.00

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Fill in this inf	ormation to i	dentify your case			
Debtor 1	Davon First Name	M Middle Name	<b>Johnson</b> Last Name	_	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	_	
Case number (if known)					Check if this is an amended filing
Official Form	106Dec				
Declaration	About an I	ndividual Debt	or's Schedules		

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
<b>√</b> No						
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
Under penalty of perjury, I declare that I have read true and correct.	the summary and schedules filed with this declaration and that they are					
X /s/ Davon M Johnson Davon M Johnson, Debtor 1	XSignature of Debtor 2					
Date <u>04/12/2016</u> MM / DD / YYYY	Date MM / DD / YYYY					

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				_	
Fill in this info	ormation to	identify your case			
Debtor 1	Davon	М	Johnson		
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Forms	107				
Official Form	107				
Statement o	f Financia	I Affairs for Ind	ividuals Filing for	r Bankruptcy	04/16
Part 1: Giv	re Details Ab	out Your Marital S	tatus and Where You	ı Lived Before	
1. What is your	current marital	status?			
☐ Married					
✓ Not marrie	ed				
2. During the las	st 3 years, have	you lived anywhere o	ther than where you live r	now?	
<b>⋈</b> No			·		
Yes. List	all of the places	you lived in the last 3 y	ears. Do not include where	you live now.	
3. Within the las	st 8 years, did y	ou ever live with a spo	ouse or legal equivalent in	a community property state or territory?	
,	roperty states ar and Wisconsin.)	nd territories include Ari	zona, California, Idaho, Lou	uisiana, Nevada, New Mexico, Puerto Rico, Texas,	
<b>☑</b> No					
Yes. Mak	e sure you fill ou	at Schedule H: Your Co	debtors (Official Form 106H	I).	

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Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income Check all that apply.  Check all that apply.  Debtor 2  Sources of income Check all that apply.  Check all that apply.	Debtor 1	Davon First Name	M Middle Name	<b>Johnson</b> Last Name	Case nur	mber (if known)			
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.    No	Part 2: Explain the Sources of Your Income								
Debtor 1  Sources of income Check all that apply.  Wages, commissions, bonuses, tips  Operating a business  For the last calendar year:  (January 1 to December 31, 2014)  (January 1 to December 31, 2015)  (Janu	Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.								
Sources of income Check all that apply. (before deductions and exclusions (before deductions and exclusions and exclusions).  From January 1 of the current year until the date you filed for bankruptcy:    Wages, commissions, bonuses, tips   Wages, commissions, bonuses, tips   Operating a business									
Check all that apply. (before deductions and exclusions Check all that apply. (before deductions and exclusions Check all that apply. (before deductions and exclusions and exclusions Check all that apply. (before deductions and exclusions and exclusions and exclusions Check all that apply. (before deductions and exclusions and exclusions and exclusions Check all that apply. (before deductions and exclusions and exclusions Check all that apply. (before deductions and exclusions and exclusions Check all that apply. (before deductions and exclusions and exclusions Check all that apply. (before deductions and exclusions and exclusions Special Section and exclusions Special Section Special				Debtor 1		Debtor 2			
bonuses, tips  Operating a business  Doperating a business  Operating a business  Doperating a business  For the last calendar year:  (January 1 to December 31, 2015)  YYYY  Operating a business  Doperating a business  Wages, commissions, bonuses, tips  Operating a business  Operating a business  For the calendar year before that:  Wages, commissions, bonuses, tips  Operating a business  Wages, commissions, bonuses, tips  Operating a business  For the calendar year before that:  Operating a business  Doperating a business					(before deductions		Gross income (before deductions and exclusions		
For the last calendar year:  (January 1 to December 31, 2015)  (January 1 to December 31, 2015)  (January 1 to December 31, 2014)  (January 1	•		<i>*</i>		\$6,841.16	_ `			
Doperating a business   Dope				Operating a business		Operating a business			
Operating a business		·			\$13,000.00				
(January 1 to December 31, 2014)  Doperating a business  Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Secu unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once un Debtor 1.	(January 1	to December 31, 20	15 ) YY	· •		• •			
<ul> <li>(January 1 to December 31, 2014) Operating a business Operating a business</li> <li>5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Secu unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once ur Debtor 1.</li> </ul>	For the calendar year before that:				\$10,000.00				
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Secu unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once ur Debtor 1.	(January 1 to December 31, 2014)		· •		• •				
☑ No ☐ Yes. Fill in the details.	Include unem and g Debto List e								

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Debtor 1		Davon First Name	M Middle Name	Johnson Last Name	Case number (if known)
Part 3:		ı		u Made Before You Fi	led for Bankruntcy
6.			-	primarily consumer debts	· ·
	□ No.	Neither	Debtor 1 nor Debtor 2 h		bts. Consumer debts are defined in 11 U.S.C. § 101(8) as
		During th	ne 90 days before you fil	ed for bankruptcy, did you p	ay any creditor a total of \$6,425* or more?
		□ No.	Go to line 7.		
		Yes.	total amount you paid th	nat creditor. Do not include	\$6,425* or more in one or more payments and the payments for domestic support obligations, such as ments to an attorney for this bankruptcy case.
		* Subjec	t to adjustment on 4/01/	19 and every 3 years after th	at for cases filed on or after the date of adjustment.
	<b>√</b> Yes	. Debtor 1	1 or Debtor 2 or both ha	ave primarily consumer de	bts.
		During th	ne 90 days before you fil	ed for bankruptcy, did you p	ay any creditor a total of \$600 or more?
		✓ No.	Go to line 7.		
		☐ Yes.	creditor. Do not include		\$600 or more and the total amount you paid that port obligations, such as child support and alimony. s bankruptcy case.
7.	Insiders corporat agent, ir	include you ions of which acluding on	ur relatives; any general ch you are an officer, dire	partners; relatives of any geector, person in control, or o	ent on a debt you owed anyone who was an insider? eneral partners; partnerships of which you are a general partner; wner of 20% or more of their voting securities; and any managing U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	. List all pa	syments to an insider.		
8.	benefite	ed an inside	er?		ments or transfer any property on account of a debt that
		payments c	on debts guaranteed or c	osigned by an insider.	
	✓ No ☐ Yes	. List all pa	syments that benefited as	n insider.	
P	art 4:	Identify	/ Legal Actions Re	epossessions, and Fo	reclosures
9.				-	ny lawsuit, court action, or administrative proceeding?
	List all s	uch matters			ns, divorces, collection suits, paternity actions, support or custody
	✓ No ☐ Yes	. Fill in the	details.		

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Deb	otor 1	Davon First Name	M Middle News	Johnson Last Name	Case number (if k	nown)		
10	Within		Middle Name		arty rangesassad foraclosa	d garnished attack	ned.	
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.						ieu,	
	<ul><li>✓ No. Go to line 11.</li><li>✓ Yes. Fill in the information below.</li></ul>							
11.	. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?							
	☑ No □ Yes	s. Fill in the detai	ils.					
12.	2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	☑ No □ Yes	<b>S</b>						
Pa	art 5:	List Certair	n Gifts and Con	tributions				
13.	Within	2 years before y	ou filed for bankru	ıptcy, did you give any gift	s with a total value of more t	than \$600 per perso	n?	
	✓ No	s. Fill in the detai	ils for each gift.					
14.	<ul> <li>Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?</li> </ul>							
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details for each gift or contribution.</li></ul>							
P	Part 6: List Certain Losses							
15.		1 year before yo isaster, or gamb		otcy or since you filed for b	ankruptcy, did you lose any	thing because of th	eft, fire,	
	☑ No	s. Fill in the detai	ils.					
P	art 7:	List Certair	n Payments or	Transfers				
16.			-	otcy, did you or anyone els kruptcy or preparing a bar	e acting on your behalf pay kruptcy petition?	or transfer any prop	perty to	
	Include	any attorneys, ba	ankruptcy petition p	reparers, or credit counseling	g agencies for services require	ed for your bankrupto	cy.	
	□ No ✓ Yes	s. Fill in the detai	ils.					
	001 debtor.cc Person Who Was Paid		Description and value of Credit Counseling	any property transferred	Date payment or transfer was made	Amount of payment		
Number Street						04/11/2015	\$15.00	
- Indin	vullibel Street						-	
City		Sta	ate ZIP Code					
Email or website address								
Description Made the Description (Math								

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Debto	or 1 <b>Davo</b> First Na		M Middle Name	Johnson Last Name	Case number (if k	known)	
Person	ert J. Adams n Who Was Paid W. Jackson,	<u> </u>	Middle Name	Description and value of ar Down payment for Chap		Date payment or transfer was made	Amount of payment \$400.00
Numb	er Street						_
Chic City	ago	IL State	<b>60607</b> ZIP Code				
Email	or website addre	SS					
17. \ a	anyone who position of the pos	before you foromised to	iled for bankrup help you deal w	otcy, did you or anyone else ith your creditors or to make you listed on line 16.	• • •		perty to
18. I	Within 2 years property trans nclude both o	s before you sferred in the utright transfe	e ordinary coursers and transfers	uptcy, did you sell, trade, or one of your business or finance or made as security (such as gradue) ave already listed on this state	cial affairs? anting of a security interest		
	☑ No ☐ Yes. Fill in	n the details.					
	-	eficiary? (		ruptcy, did you transfer any particular called asset-protection device		rust or similar devid	ce of which
Pa	rt 8: List	Certain F	inancial Acc	ounts, Instruments, Sa	fe Deposit Boxes, and	d Storage Units	
 	nclude checki nouses, pension	<b>d, sold, mov</b> ng, savings,	red, or transferromoney market, o	otcy, were any financial acco ed? or other financial accounts; cer ciations, and other financial ins	tificates of deposit; shares i	•	
	☑ No ☐ Yes. Fill in	n the details.					

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Deb	otor 1	<b>Davon</b> First Name	M Middle Name	Johnson Last Name	Case number (if known)	
21.	Do you				uptcy, any safe deposit box or other depository	
		urities, cash, or oth	ner valuables?			
	✓ No ☐ Yes	. Fill in the details.				
22.	-	ou stored property	in a storage unit or p	place other than your home	within 1 year before you filed for bankruptcy?	
	✓ No ☐ Yes	. Fill in the details.				
Р	art 9:	Identify Prope	erty You Hold or	Control for Someone E	Else	
23.	•	hold or control any in trust for someon	· · · ·	one else owns? Include an	y property you borrowed from, are storing for,	
	<b>☑</b> No					
	☐ Yes	. Fill in the details.				
P	art 10:	Give Details A	About Environme	ntal Information		
For	the purp	ose of Part 10, the	following definitions	s apply:		
ı	hazardoι	s or toxic substan	ce, wastes, or mater		concerning pollution, contamination, releases of irface water, groundwater, or other medium, es, wastes, or material.	
		-		defined under any environn luding disposal sites.	nental law, whether you now own, operate, or	
				mental law defines as a haz minant, or similar item.	ardous waste, hazardous substance, toxic	
Rep	ort all no	otices, releases, an	d proceedings that y	ou know about, regardless	of when they occurred.	
24.	Has any law?	/ governmental uni	it notified you that yo	ou may be liable or potential	lly liable under or in violation of an environmental	
	☑ No	<b>=</b> 0.1 0.1 0.2				
25	_	. Fill in the details.	armmental unit of an	y release of hazardous mate		
23.	☑ No	. Fill in the details.	ernmental unit of any	y release of flazardous fliate	शाबा १	
26.	Have yo	ou been a party in a	any judicial or admin	istrative proceeding under a	any environmental law? Include settlements and	
	☑ No ☐ Yes	. Fill in the details.				

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Deb	otor 1	Davon	M	Johnson	Case number (if known)
		First Name	Middle Name	Last Name	
P	art 11:	Give Detai	ls About Your Bu	siness or Connect	tions to Any Business
27.	Within 4		you filed for bankrupt	cy, did you own a bus	iness or have any of the following connections to any
		A member of a A partner in a p An officer, dire	a limited liability compa partnership ector, or managing exec	ny (LLC) or limited liabi	
	<u>-</u>		ove applies. Go to Pa apply above and fill in	rt 12. the details below for ea	ach business.
28.			you filed for bankrupt s, creditors, or other		ncial statement to anyone about your business? Include
	□ No □ Yes	. Fill in the deta	ils below.		
P	art 12:	Sign Belov	v		
that pro	answers	s are true and of fraud in conne	correct. I understand	that making a false st	attachments, and I declare under penalty of perjury atement, concealing property, or obtaining money or ines up to \$250,000, or imprisonment for up to 20 years,
X /	s/ Davo	n M Johnson		X Signature of D	
[	Davon M	Johnson, Debto	r 1	Signature of D	ebtor 2
[	Date	04/12/2016		Date	
Did	you atta	ch additional p	ages to Your Stateme	nt of Financial Affairs	for Individuals Filing for Bankruptcy (Official Form 107)?
	No Yes				
Did	you pay	or agree to pay	y someone who is no	an attorney to help y	ou fill out bankruptcy forms?
Ø		me of person			Attach the Bankruptcy Petition Preparer's Notice,
Ш	. 50 10.				Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$ 

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In	re Davon M Johnson	Case No.	
		Chapter	13
	DISCLOSURE OF COMPENSATION OF A	TTORNEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I that compensation paid to me within one year before the filing of the petiti services rendered or to be rendered on behalf of the debtor(s) in contempts as follows:	ion in bankruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$3	3,000.00
	Prior to the filing of this statement I have received		\$400.00
	Balance Due	\$2	2,600.00
2.	The source of the compensation paid to me was:  ☐ Other (specify)		
3.	The source of compensation to be paid to me is:		
	✓ Debtor ☐ Other (specify)		
4.	I have not agreed to share the above-disclosed compensation with a associates of my law firm.	ny other person unle	ss they are members and
	I have agreed to share the above-disclosed compensation with anoth associates of my law firm. A copy of the agreement, together with a compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal service	ce for all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	debtor in determining	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs	and plan which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirmat	ion hearing, and any	adjourned hearings thereof;

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

> 04/12/2016 /s/ Robert J. Adams & Associates

Date Robert J. Adams & Associates Robert J. Adams & Associates 901 W. Jackson, Suite 202

> Chicago, IL 60607 Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Davon M Johnson

Davon M Johnson

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Black River Memorial Hospital 711 W Adams St. Black River Falls, WI 54615

City Of Chicago Department Of Revenue PO Box 88292 Chicago, IL 60680

Convergent Outsourcing PO Box 9004 Renton, WA 98057

Credit Burearu Data Inc 115 6 th St N La Cross, WI 54601

Dept Of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773

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